

Page 2

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| PATENT APPLICATION FEE DETERMINATION RECORD  |   |                                  |       |                                    |                 | Application or Docket Number<br><b>101092878</b> |                         |
|--|---|----------------------------------|-------|------------------------------------|-----------------|--|-------------------------|
| Substitute for Form PTO-875  |   |                                  |       |                                    |                 |  |                         |
| <b>CLAIMS AS FILED – PART I</b><br><div style="display: flex; justify-content: space-around;"> <span>(Column 1)</span> <span>(Column 2)</span> </div>                            |   |                                  |       |                                    |                 |  |                         |
| FOR  | NUMBER FILED  | NUMBER EXTRA                     |       |                                    | SMALL ENTITY    | OR   | OTHER THAN SMALL ENTITY |
| BASIC FEE<br>(37 CFR 1.16(a))  |   |                                  |       |                                    | RATE            |  | RATE                    |
| TOTAL CLAIMS<br>(37 CFR 1.16(c))   | minus 20 =  | *                                |       |                                    | FEE             |  | FEE                     |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(b))   | minus 3 =   | *                                |       |                                    | X \$ _____ =    |  | X \$ _____ =            |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  |   |                                  |       |                                    | X \$ _____ =    |  | X \$ _____ =            |
|  |   |                                  |       |                                    | + \$ _____ =    |  | + \$ _____ =            |
|  |   |                                  |       | TOTAL                              |                 | OR   | TOTAL                   |
| * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |                                  |       |                                    |                 |  |                         |
| <b>CLAIMS AS AMENDED – PART II</b><br><div style="display: flex; justify-content: space-around;"> <span>(Column 1)</span> <span>(Column 2)</span> <span>(Column 3)</span> </div> |   |                                  |       |                                    |                 |  |                         |
| AMENDMENT A  | 11916   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA   |  |                         |
|  | Total<br>(37 CFR 1.16(c))                                       | *                                | Minus | **                                 | =               | RATE   | ADDITIONAL FEE          |
|  | Independent<br>(37 CFR 1.16(b))                                 | *                                | Minus | ***                                | =               | X \$ _____ =                                     | OR                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                  |       |                                    |                 | X \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    |                 | + \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    | TOTAL ADD'L FEE |  | OR                      |
| AMENDMENT B  |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA   |  |                         |
|  | Total<br>(37 CFR 1.16(c))                                       | *                                | Minus | **                                 | =               | RATE   | ADDITIONAL FEE          |
|  | Independent<br>(37 CFR 1.16(b))                                 | *                                | Minus | ***                                | =               | X \$ _____ =                                     | OR                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                  |       |                                    |                 | X \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    |                 | + \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    | TOTAL ADD'L FEE |  | OR                      |
| AMENDMENT C  |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA   |  |                         |
|  | Total<br>(37 CFR 1.16(c))                                       | *                                | Minus | **                                 | =               | RATE   | ADDITIONAL FEE          |
|  | Independent<br>(37 CFR 1.16(b))                                 | *                                | Minus | ***                                | =               | X \$ _____ =                                     | OR                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                  |       |                                    |                 | X \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    |                 | + \$ _____ =                                     | OR                      |
|  |   |                                  |       |                                    | TOTAL ADD'L FEE |  | OR                      |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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